

Testimony before the Appropriations Committee February 17, 2012 Midterm Budget Recommendations for DSS Safety Net Services Network and Prevention Services

Daniel J O'Connell, Ed.D., President Carol Huckaby, Director of Programs

We are testifying today about the midterm budget recommendations that are contained in the Department of Social Services budget for the Safety Net Services Program that is administered on a statewide basis by the CT Council of Family Service Agencies.

This program received a cut of 158,048 by DSS at the start of this fiscal year on July 1, 2011. Last month, the Governor ordered an immediate rescission of 86,126 to occur during this fiscal year, and at this time the mid-term budget recommendations also contains a 10 % reduction of 189,081 in the DSS budget line item for Safety Net Services to take effect July 1st.

Additionally the Safety Net Services Program also receives funding for the Employment Success portion of the Safety Net that is included with other agencies in DSS's line item #16160 for Community Services. The midterm budget proposal includes a proposed cut of 29% in this line item which, if applied equally to all of the agencies, would further reduce the Safety Net Program by an additional 212,425 going forward. The combined impact of these assorted cuts would reduce the Safety Net Program by an astonishing 645,680, and dramatically weaken the quality and scope of services for this extremely vulnerable population.

It is ironic that at a time when we are all concerned about protecting the Safety Net of Human Services, we are talking about severe cuts to the one state contract that is called "The Safety Net Program." In response to major welfare reform changes in 1997, this program was initiated with the goal of reducing the harm that may occur to children whose families have significant barriers to employment and lose eligibility for T.A.N.F. benefits. The risks of serious harm to these families and children are even greater today and for that reason we ask you to consider eliminating these proposed cuts from the proposed budget.

Considering the high unemployment rate, federal cuts to the Energy Assistance Program (LIHEAP) and the increased demand on food banks, the proposed cuts to the Safety Net program would be devastating for these families. Reduction in funding would result in a decline in basic needs payments, increased worker caseloads and a decrease in clinical and case management services for these most vulnerable families. The most devastating results would be

homelessness, loss of heating assistance, hunger and the likelihood of increased mental health and stress issues for adults which would result in unsafe circumstances for the children.

Since its inception the Safety Net program has served over 15,888 families and reduced the possibility of harm/injury occurring to approximately 32,729 children by providing parents with tools to reduce stressors and improve parenting skills. In extreme cases, if necessary, families in immediate crisis are referred to D.C.F. for more intensive services. The program has two components, one for families that have no source of income due to loss of cash benefits and the other component is for families that are at risk of losing cash benefits.

The loss of Temporary Assistance for Needy Families (TANF) for those families who are not employed increases the risk of children for abuse, neglect, homelessness and trauma. Multiple studies have demonstrated that children living in families in high-stress situations may be more apt to experience physical and or mental harm.

The program provides home-based clinical and case management services that reduce barriers to employment and empower families to become self sufficient by identifying and building on their strengths. This program teaches all families to develop budgets, seek out and utilize community resources and advocate for themselves. Major barriers for these families include physical limitations, mental health, substances use/abuse, domestic violence, cognitive disabilities, child-care, language barriers, transportation, little or no work history and low educational attainment.

The program also assists prior TFA families with no income by providing Basic Needs payments for housing, utilities, diapers and food directly to landlords and utility companies. A reduction in funding will directly impact these families and create added risk for their children.

A Safety Net Success Story

Mrs. L, a widow with two children was referred to the Safety Net Program in February of 2010; she had no job and was being evicted from her home. In the previous two years, she had lost her husband and her brother was murdered resulting in her being clinically depressed.

The Safety Net program reached out to her and connected her with the program clinician who set up counseling to help with the depression. The program Primary Service Manager worked with her setting goals to continue counseling and locate full-time employment and affordable housing. Eventually, Mrs. L found a full time job making \$9.00 an hour and the program paid her security deposit on her new apartment and her back utility bills so she could have a new start. The case was closed in November of 2010 and she continues to work and take care of her children. Without Safety Net support services, Mrs. L may have remained unemployed and homeless, her depression would have become worse and her children may have become wards of DCF in the foster care program, resulting in the destruction of the family unit.

A Prevention Success Story

Mr. S was referred for Empowering People for Success (EPS) services because it his Jobs First Employment Services (JFES) worker thought he was having difficulty understanding and following through on the program requirements and in danger of sanctioning. The EPS Primary Service Manager met the client at his apartment where he lived with his mother and 3 year old son whom he had sole custody. The biological mother had drug and alcohol problems and could not care for the son. Mr. S had no child care in place and no transportation but walked everywhere with his son looking for work and attempting to get to JFES appointments.

The PSM suspected some cognitive difficulties might be present with the client and the Clinician was brought in to assess further. After a brief evaluation and assistance from the Clinician and PSM, the client was connected with Bureau of Rehabilitation Services (BRS) and his son was evaluated by the Birth to Three program. Based on these referrals, the son was diagnosed as autistic and is now in a supported day care and they continue to receive services through Easter Seals and the Birth to Three programs. With support and guidance from the EPS program staff, the client applied for and was granted Social Security benefits. Mr. S is now employed at a Rehabilitation center. EPS also assisted Mr. S in obtaining clothing the child needed for school and a stroller so his dad didn't have to carry him everywhere.

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